OFFENDER VISITATION REGISTER

(EVERYONE must be signed in)

It shall be unlawful for any person to obtain or procure for or give an offender a gun, pistol, or any other weapon, or intoxicating liquor or amphetamines, or biphetamines, or any other hallucinogenic drugs, or other drugs, regardless of the amount, or any other article or item, without the knowledge and consent of the Warden or his Deputy Warden in charge. Any person who knowingly violates the provisions of this Section shall be guilty of a felony and upon conviction thereof, shall be imprisoned for not less than one, not more than five years.

I understand the Department of Corrections has a zero tolerance policy prohibiting visitors from having sexual contact with offenders, other than that permitted by this agency (i.e. minimal personal contact such as hand shaking, embracing or kissing is permitted only at the beginning and conclusion of the visit). I understand that my authorization to enter a correctional institution is conditional on my agreement not to engage in sexual activity with any offender and to report such contact to a correctional employee when I learn of it. I also understand that if I violate this agreement I may be permanently banned from entering all Georgia Department of Corrections correctional institutions and that the Department of Corrections may pursue criminal prosecution.

DATE	NAME (Please Print)	EMPLOYER	OFFENDER CONTACTING	CAR TAG#	TIME IN	TIME OUT	OFFICERS SIGNATURE	REMARKS

VISITOR AGREES NOT TO HOLD THE GEORGIA DEPARTMENT OF CORRECTIONS OR IT'S EMPLOYEES RESPONSIBLE OR LIABLE FOR ANY ACCIDENT OR INJURY

RETENTION SCHEDULE: This completed form shall be kept locally for one year and then destroyed.